

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITIC.	INITIALS	ID NO.	DATE
FEE DETERMINATION	WIT		09-26-01
O.I.P.E. CLASSIFIER.	ma		10-5-01
FORMALITY REVIEW	B2	JCS-883	10-28-01
RESPONSE FORMALITY REVIEW	Tequest	925	12-31-01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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10/2/01  
 03-2  
 08-02-02